APPLICATION DATA SHEET

Application Information

Application number::

10/051.389

Filing Date::

01/22/02

Application Type:: Subject Matter::

Regular Utility

Suggested classification::

Suggested Group Art Unit::

None

CD-ROM or CD-R?:: Number of CD disks::

Number of copies of CDs::

Sequence submission?:: Number of copies of CRF::

Computer Readable Form (CRF)?::

No

Title ::

METHOD FOR CONTROLLING THE QUALITY

OF THE COOLANT FOR FUEL CELL

SYSTEMS

Attorney Docket Number .:

130309.426

Request for Early Publication?::

Nο Nο

Request for Non-Publication?::

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?::

Nο No

Petition included?::

Petition Type::

Licensed U.S. Gov't Agency::

Contract or Grant No::

Secrecy Order in Parent Appl.?::

No

Initial

10/15/04

First Applicant Information

Applicant Authority Type::

Primary Citizenship Country::

Inventor Germany

Status::

Full Capacity

Given Name::

Anton

Middle Name::

.

Family Name::

Sonntag

Name Suffix::

Kirchheim

State or Province of Residence::

Germany

Country of Residence::

City of Residence::

Huelenbergstrasse 8

Street of mailing address:: City of mailing address::

Kirchheim

State or Province of malling address::

Country of mailing address::

Germany

Postal or Zip Code of mailing address:: 73230

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Second Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Germany

Status::

Full Capacity

Given Name::

Josef

Middle Name"

Family Name::

Sonntag

Name Suffix:: City of Residence::

Kirchheim

State or Province of Residence::

Country of Residence::

Germany

Street of mailing address:: City of mailing address:: Weileraecker 27 Kirchheim

State or Province of mailing address::

Country of mailing address::

Germany

Postal or Zip Code of mailing address:: 72320

Third Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Germany

Status::

Full Capacity

Given Name::

Hubert

Middle Name::

. . .

Family Name::

Urban

Name Suffix:: City of Residence::

Ohmden

State or Province of Residence::

Country of Residence:: Street of mailing address:: Germany

Haldenweg 20

City of mailing address::

Ohmden

State or Province of mailing address::

Country of mailing address::

Germany

Postal or Zip Code of mailing address::

73275

Correspondence Information

Correspondence Customer Number ::

00500

Representative Information

1	Representative Customer Number::	0	00500

Initial

10/15/04

BEST		i
	AVAILABLE	COPY

Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
	*		

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
Germany	101 02 247.6	01/19/01	Yes
		- 10	

Assignee Information

Assignee name::		
Street of mailing address::		
City of mailing address::		
State or Province of mailing address::		
Country of mailing address::		
Postal or Zlp Code of mailing address::		